

APR-28-2005 THU 10:56 AM BST&Z

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P. 02

APR 28 2005

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL		Application No. 10/612,544
		Filing Date July 1, 2003
		First Named Inventor Thomas E. Pearson
		Art Unit 2822
		Examiner Name Graybill, David E.
		Attorney Docket Number 42P13560D

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. § 1.114 [Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).]

a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).

ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

iii. Other _____

b. Enclosed

i. Amendment/Reply iii. Information Disclosure Statement (IDS)

ii. Affidavit(s)/Declaration(s) iv. Other _____

2. Miscellaneous

a. Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; FCC under 37 C.F.R. § 1.17(i) required)

b. Other _____

3. Fees

The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-2666.

i. RCE fee required under 37 C.F.R. § 1.17(e) and any additional claims fee(s)

ii. Extension of time fee (37 C.F.R. § 1.136 and 1.17)

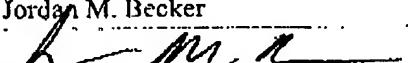
iii. Other: (\$0.00)

b. Check in the amount of \$790.00 enclosed 04/29/2005 SDEHBOB1 00000092 022666 10612544

c. Payment by credit card (Form PTO-2038 enclosed) 01 FC:1801 790.00 DA

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

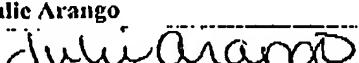
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Jordan M. Becker	Registration No. (Attorney/Agent)	39,602
Signature		Date	April 28, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

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April 28, 2005

Name (Print/Type)	Julie Arango	Date	April 28, 2005
Signature			

Based on PTO/SIM/50 (08-03) as modified by Bilezikyan, Salokoff, Taylor & Zisman (wtr) 02/04/2004.
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APR 28 2005

Attorney Docket No.: 42P13560D

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application for:

Thomas E. Pearson et al.

Serial No.: 10/612,544

Filing Date: July 1, 2003

For: INTERPOSER TO COUPLE A
MICROELECTRONIC DEVICE
PACKAGE TO A CIRCUIT BOARD

which is a divisional of:

Serial No.: 10/080,438

Filing Date: February 21, 2002

which issued as U.S. Patent No.: 6,791,035 B2

Issued: September 14, 2004

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Examiner: Graybill, David E.

Group Art Unit: 2822

Certificate of Transmission

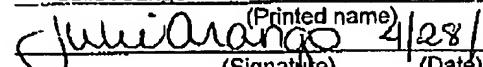
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April 28, 2005

(Date of Transmission)

Julie Arango

(Printed name)

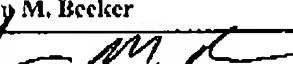
 4/28/05

(Signature) (Date)

**AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION
ACCOMPANYING REQUEST FOR CONTINUED EXAMINATION (RCE)**

Dear Sir:

In response to the Final Office Action mailed on March 4, 2005 and the Interview Summary mailed on April 5, 2005, please enter the following amendment and consider the remarks below in connection with the accompanying Request for Continued Examination (RCE):

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete If Known <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/612,544</td> </tr> <tr> <td>Filing Date</td> <td>July 1, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Thomas E. Pearson</td> </tr> <tr> <td>Examiner Name</td> <td>Graybill, David E.</td> </tr> <tr> <td>Art Unit</td> <td>2822</td> </tr> <tr> <td>Attorney Docket No.</td> <td>42P13560D</td> </tr> </table>		Application Number	10/612,544	Filing Date	July 1, 2003	First Named Inventor	Thomas E. Pearson	Examiner Name	Graybill, David E.	Art Unit	2822	Attorney Docket No.	42P13560D																																																																						
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TOTAL AMOUNT OF PAYMENT	(\$)	790.00																																																																																			
METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input checked="" type="checkbox"/> Credit any overpayments <small>under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</small>																																																																																					
FEES CALCULATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: left; padding: 5px;"> 1. EXTRA CLAIM FEES </td> </tr> <tr> <td>Total Claims</td> <td>28</td> <td>Extra Claims</td> <td>Fee (from below)</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>4' = 0</td> <td>X 50.00 = \$0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>X 200.00 = \$0.00</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>=</td> </tr> <tr> <td colspan="2" style="text-align: left; padding: 5px;"> Large Entity Small Entity </td> <td colspan="2" style="text-align: left; padding: 5px;"> Fee Description </td> </tr> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td>Fee Description</td> <td>Fee Paid</td> </tr> <tr> <td>1202 50</td> <td>2202 25</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201 200</td> <td>2201 100</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 300</td> <td>2203 180</td> <td>Multiple Dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 300</td> <td>2204 150</td> <td>"Reissues independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 300</td> <td>2205 150</td> <td>"Reissues claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 5px;">SUBTOTAL (1)</td> <td style="text-align: right; padding: 5px;">(\$)</td> <td style="text-align: right; padding: 5px;">0.00</td> </tr> </table> <p style="text-align: right; margin-top: -10px;"><small>*or number previously paid, if greater. For Reissues, see below</small></p>				1. EXTRA CLAIM FEES		Total Claims	28	Extra Claims	Fee (from below)	Independent Claims	4	4' = 0	X 50.00 = \$0.00	Multiple Dependent			X 200.00 = \$0.00				=	Large Entity Small Entity		Fee Description		Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid	1202 50	2202 25	Claims in excess of 20		1201 200	2201 100	Independent claims in excess of 3		1203 300	2203 180	Multiple Dependent claim, if not paid		1204 300	2204 150	"Reissues independent claims over original patent		1205 300	2205 150	"Reissues claims in excess of 20 and over original patent		SUBTOTAL (1)		(\$)	0.00																																
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SUBMITTED BY		Complete if applicable																																																																																			
Name (Print/Type)	Jordan M. Becker	Registration No. (Attorney/Agent)	39,602																																																																																		
Signature		Telephone	(408) 720-8300																																																																																		
		Date	04/28/05																																																																																		

Patent on PTO/SB/17 (12-01) as modified by Blakely, Sokoloff, Taylor & Zafman (M) 12/15/2004.
 BE ND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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FAX NO. 408 720 9397

APR 28 2005

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

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12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

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Deliver to: Graybill, David E., USPTOArt Group: 2822Facsimile No.: 703-872-9306Date: April 28, 2005From: Jordan M. Becker, Reg. No. 39,602Our Docket No.: 42P13560DNumber of pages 19, including this sheet.Application No.: 10/612,544Filing Date: 7/1/2003Docket Due Date(s): 6/4/2005

Enclosed are the following documents:

<input type="checkbox"/> Amendment: <u>..... (____ pgs)</u>	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief <u>(____ pgs)</u>	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: <u>..... (____ pgs) w/cover & abstract)</u>	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet <u>(____ pgs)</u>	<input checked="" type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile	<input type="checkbox"/> Reply Brief <u>(____ pgs)</u>
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & PTOA <u>(____ pgs)</u>	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: <u>..... sheets, ____ figures</u>	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: <u>.....</u>	<input type="checkbox"/> Response to Written Opinion <u>(____ pgs)</u>
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 <u>(____ pgs)</u>	<input type="checkbox"/> Transmittal of Publication Fee Due
<input checked="" type="checkbox"/> Other Amendment and Response to Final Office Action Accompanying Request for Continued Examination (15 pgs.)	<input type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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4/28/2005

Date

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